

Fill in this information to identify the case:Debtor name **Premier Exhibitions Management, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**Case number (if known) **3:16-bk-02233-PMG**☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Bank of America****Full Analysis Business Checking****9697****\$1,374,200.00**3.2. **Wells Fargo Bank****Business Choice Checking****1139****\$4,532.16**3.3. **Bank of America****Full Analysis Business Checking****3309****\$54,185.74**3.4. **Royal Bank of Scotland
Name on account: RMS Titanic (UK)
Limited****Business Current Account****4386****\$11,472.52**3.5. **Royal Bank of Scotland
Name on account: Premier (United
Kingdom) Limited****4351****\$46,816.67****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$1,491,207.09**Part 2: Deposits and Prepayments**

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 1

Debtor **Premier Exhibitions Management, LLC**
NameCase number (If known) **3:16-bk-02233-PMG****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
- ☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits
Description, including name of holder of deposit7.1. **Buena Park security deposit** **\$55,570.00**7.2. **Orlando security deposit** **\$18,465.00**7.3. **New York security deposit** **\$3,120.00**7.4. **Corporate security deposit** **\$22,598.00****8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment8.1. **Prepaid G&A** **\$5,649.00**8.2. **Prepaid G&A** **\$5,536.00**8.3. **Prepaid G&A** **\$18,667.00**8.4. **Prepaid G&A** **\$6,667.00**8.5. **Prepaid insurance** **\$240,400.00****9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$376,672.00**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes Fill in the information below.

11. Accounts receivable

Debtor Premier Exhibitions Management, LLC
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25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No☐ Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.☐ Yes Fill in the information below.**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Furniture and fixtures	\$55,448.00	Book value	\$55,448.00
40.	Office fixtures Exhibitry fixtures	\$3,053,103.00	Book value	\$3,053,103.00
41.	Office equipment, including all computer equipment and communication systems equipment and software Computers	\$1,799.00	Book value	\$1,799.00
	Computer software	\$14,555.00	Book value	\$14,555.00
	Office equipment	\$1,241.00	Book value	\$1,241.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$3,126,146.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

☒ No☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No☐ Yes**Part 8: Machinery, equipment, and vehicles**

Debtor **Premier Exhibitions Management, LLC**
NameCase number (If known) **3:16-bk-02233-PMG****46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
	Heavy equipment	\$37,778.00	Book value	\$37,778.00
	Durable goods/tools	\$15,060.00	Book value	\$15,060.00

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$52,838.00**52. Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No
- ☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
- ☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
- ☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
	Trade names	\$358,020.00	Book value	\$358,020.00
61.	Internet domain names and websites			
62.	Licenses, franchises, and royalties			

Debtor Premier Exhibitions Management, LLC
NameCase number (If known) 3:16-bk-02233-PMGLicense agreements\$2,572,740.00Book value\$2,572,740.0063. **Customer lists, mailing lists, or other compilations**64. **Other intangibles, or intellectual property**65. **Goodwill**66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$2,930,760.0067. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.☐ Yes Fill in the information below.

Debtor **Premier Exhibitions Management, LLC**
NameCase number (If known) **3:16-bk-02233-PMG****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$1,491,207.09	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$376,672.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$1,087,777.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$4,043,313.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$3,126,146.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$52,838.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$2,930,760.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$13,108,713.09	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$13,108,713.09

Fill in this information to identify the case:Debtor name **Premier Exhibitions Management, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**Case number (if known) **3:16-bk-02233-PMG**☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Haiping Zou <small>Creditor's Name</small> Unit 110-115 Wanke Qingqing Homeland Dougezhuang, Chaoyang Dist. Beijing, China 100021 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Trade Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,000,000.00	\$0.00

2.2	Jihe Zhang <small>Creditor's Name</small> 59 Dongsanhuan Middle Road Fuli Shuangzi Towers, Bd. A Suite 2606, Chaoyang District Beijing, China 100022 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred	Describe debtor's property that is subject to a lien Trade Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No	\$1,000,000.00	\$0.00
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Debtor **Premier Exhibitions Management, LLC**
NameCase number (if know) **3:16-bk-02233-PMG**☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed2.3 **Lange Feng**

Creditor's Name

**15953 107th Avenue
Surrey, BC V4N 5N7**

Creditor's mailing address

Describe debtor's property that is subject to a lien

\$1,000,000.00**\$0.00****Trade**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$3,000,000.00**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name **Premier Exhibitions Management, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**Case number (if known) **3:16-bk-02233-PMG**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.☐ Yes. Go to line 2.**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address 4Wall Entertainment Lighting 35 State Street Moonachie, NJ 07074 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,587.95
3.2	Nonpriority creditor's name and mailing address 87AM Holdings, LLC 42 W. 39th Street 4th Floor New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Trade Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$12,700.00
3.3	Nonpriority creditor's name and mailing address A&S Sweeping, Inc. 11762 DePalma Road Corona, CA 92883 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Trade Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$350.00
3.4	Nonpriority creditor's name and mailing address A-NYC Display and Graphics 8500 4th Avenue Suite D Brooklyn, NY 11209 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,600.00

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3.5	Nonpriority creditor's name and mailing address ABC Imaging 1155 21st Street NW Suite M400 Washington, DC 20036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,013.00
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3.6	Nonpriority creditor's name and mailing address ABM Janitorial-Southeast PO Box 934418 Atlanta, GA 31193 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$2,072.00
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3.7	Nonpriority creditor's name and mailing address Adrenaline Media, Inc. 329 West Franklin Street Ocoee, FL 34761 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$11,454.00
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3.8	Nonpriority creditor's name and mailing address Air Stream Air Conditioning 245 Newton Road Suite 305 Plainview, NY 11803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$2,763.00
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3.9	Nonpriority creditor's name and mailing address Allgood Pest Control 2540 Lawrenceville Highway Lawrenceville, GA 30042 Date(s) debt was incurred ____ Last 4 digits of account number <u>5167</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$95.00
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3.10	Nonpriority creditor's name and mailing address American Guardian Security System 6981 Peachtree Industrial Bl Norcross, GA 30092 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$29.00
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3.11	Nonpriority creditor's name and mailing address Anglepix 254 Colonial Homes Drive Atlanta, GA 30309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$536.80
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3.12	Nonpriority creditor's name and mailing address Base Entertainment 3667 Las Vegas Blvd. South Las Vegas, NV 89109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Marketing commission</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,074.90
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3.13	Nonpriority creditor's name and mailing address BML Productions, Inc. dba Generi 1 Aquarium Drive Secaucus, NJ 07094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Production</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$3,300.00
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3.14	Nonpriority creditor's name and mailing address Bright House Networks PO Box 30574 Tampa, FL 33630 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,033.44
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3.15	Nonpriority creditor's name and mailing address Brilliance PO Box 867 Benicia, CA 94510 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$83.80
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3.16	Nonpriority creditor's name and mailing address Broadway Video 30 Rockefeller Plaza 54th Floor New York, NY 10112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$250,000.00
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3.17	Nonpriority creditor's name and mailing address Brookridge Consulting 43 Warren Street New York, NY 10007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Professional services</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$3,250.00
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3.18	Nonpriority creditor's name and mailing address Bulbtronics, Inc. 45 Banfi Plaza North Farmingdale, NY 11735 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$165.01
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3.19	Nonpriority creditor's name and mailing address CBS Outdoor/Outfront Media PO Box 33074 Newark, NJ 07188 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$111,500.00
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3.20	Nonpriority creditor's name and mailing address CBS Radio NY 345 Hudson Street 10th Floor New York, NY 10014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,500.05
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3.21	Nonpriority creditor's name and mailing address Century Link Phoenix, AZ 85062 Date(s) debt was incurred ____ Last 4 digits of account number <u>9674</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$254.16
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3.22	Nonpriority creditor's name and mailing address CIT Technology Financing Ctr 21146 Network Place Chicago, IL 60673 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$312.00
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3.23	Nonpriority creditor's name and mailing address City Guide 498 Seventh Avenue 10th Floor New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,329.00
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3.24	Nonpriority creditor's name and mailing address Coco-Cola Enterprises PO Box 403390 Atlanta, GA 30384 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$520.00
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3.25	Nonpriority creditor's name and mailing address ConEdison PO Box 1702 New York, NY 10116 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$968.22
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Debtor	Premier Exhibitions Management, LLC Name	Case number (if known)	3:16-bk-02233-PMG
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3.26	Nonpriority creditor's name and mailing address Cortina Productions 1651 Old Meadow Road Mc Lean, VA 22102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,518.00
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3.27	Nonpriority creditor's name and mailing address Crane Worldwide Logistics PO Box 844174 Dallas, TX 75284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$562.32
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3.28	Nonpriority creditor's name and mailing address Creative Pest Management Inc PO Box 965674 Marietta, GA 30066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$190.00
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3.29	Nonpriority creditor's name and mailing address CRI Properties, Ltd. P.O. Box 734 Aurora, OH 44202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,177.00
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3.30	Nonpriority creditor's name and mailing address CT Corporation System PO Box 301133 Dallas, TX 75303 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,475.16
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3.31	Nonpriority creditor's name and mailing address CTM Media Group, Inc. 11 Largo Drive South Stamford, CT 06907 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,271.00
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3.32	Nonpriority creditor's name and mailing address Davler Media Group 498 Seventh Avenue New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,313.00
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Debtor	Premier Exhibitions Management, LLC Name	Case number (if known)	3:16-bk-02233-PMG
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3.33	Nonpriority creditor's name and mailing address DeKalb County Watershed PO Box 1027 Decatur, GA 30031 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$179.85
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3.34	Nonpriority creditor's name and mailing address Design Electronics 4956 Oakwood Drive Niagra Falls, ON L2E 6S5 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,956.00
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3.35	Nonpriority creditor's name and mailing address Direct Media, Inc. 72 Sharp Street Unit C12 Hingham, MA 02043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,000.00
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3.36	Nonpriority creditor's name and mailing address Discovery Benefits, Inc. PO Box 9528 Fargo, ND 58106 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$85.00
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3.37	Nonpriority creditor's name and mailing address Dunbar Armored, Inc. PO Box 64115 Baltimore, MD 21264 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,214.38
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3.38	Nonpriority creditor's name and mailing address Eurographics, Inc. 9105 Salley Street Montreal, QC H8R 2C8 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,148.00
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3.39	Nonpriority creditor's name and mailing address Expedia, Inc. 10190 Covington Cross Drive Las Vegas, NV 89144 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,489.46
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Debtor Name	Premier Exhibitions Management, LLC	Case number (if known)	3:16-bk-02233-PMG
3.40	Nonpriority creditor's name and mailing address F.P.I.S., Inc. 220 Story Road Ocoee, FL 34761 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$4,428.00
3.41	Nonpriority creditor's name and mailing address FedEx PO Box 660481 Dallas, TX 75266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$623.30
3.42	Nonpriority creditor's name and mailing address FedEx Custom Critical PO Box 645135 Pittsburgh, PA 15264 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$4,927.94
3.43	Nonpriority creditor's name and mailing address Florida Dept. of Revenue 5050 W. Tennessee Street Tallahassee, FL 32399 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Taxes</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$4,513.00
3.44	Nonpriority creditor's name and mailing address Florida Suncoast Tourism 10750 75th Street Seminole, FL 33777 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
3.45	Nonpriority creditor's name and mailing address Fox Ice Age Release P.O. Box 900 Beverly Hills, CA 90213 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,250,000.00
3.46	Nonpriority creditor's name and mailing address Freedom Communications, Inc. 1801 W. Olympic Blvd. Pasadena, CA 91199 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$5,250.00

Debtor Name	Premier Exhibitions Management, LLC	Case number (if known)	3:16-bk-02233-PMG
3.47	Nonpriority creditor's name and mailing address Ful-Bro Heating & Air Conditioning 3230 Cumberland Drive Chamblee, GA 30341 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$358.00
3.48	Nonpriority creditor's name and mailing address George F. Eyde Orlando LLC Louis J. Eyde Orlando LLC PO Box 4218 East Lansing, MI 48826 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lease</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,900.00
3.49	Nonpriority creditor's name and mailing address Georgia Dept. of Revenue 1800 Century Blvd. NE Suite 12000 Atlanta, GA 30345 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Taxes</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$6,104.00
3.50	Nonpriority creditor's name and mailing address Georgia Power 96 Annex Atlanta, GA 30396 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$3,955.00
3.51	Nonpriority creditor's name and mailing address Global Equipment Co. PO Box 905713 Charlotte, NC 28290 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$151.94
3.52	Nonpriority creditor's name and mailing address GRM Information Management PO Box 978589 Dallas, TX 75397 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$893.16
3.53	Nonpriority creditor's name and mailing address Gwinnett County Police Dept. PO Box 602 Lawrenceville, GA 30046 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00

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Premier Exhibitions Management, LLC Name		
3.54 Nonpriority creditor's name and mailing address Higi SH LLC 150 North Wacker Drive Chicago, IL 60606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$2,376.00
3.55 Nonpriority creditor's name and mailing address Historical Indexes Publishin 900 Reichert Avenue Suite 432 Novato, CA 94945 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,495.00
3.56 Nonpriority creditor's name and mailing address HM Peachtree Corners I LLC PO Box 32149 New York, NY 10087 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$371.78
3.57 Nonpriority creditor's name and mailing address Home Depot Credit Services P.O. Box 9055 Des Moines, IA 50368 Date(s) debt was incurred ____ Last 4 digits of account number <u>5095</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$5,808.00
3.58 Nonpriority creditor's name and mailing address IESI - NY Corporation Dallas, TX 75266 Date(s) debt was incurred ____ Last 4 digits of account number <u>4496</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$871.00
3.59 Nonpriority creditor's name and mailing address InnerWorkings Inc. 1440 Broadway 22nd Floor New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$3,183.60
3.60 Nonpriority creditor's name and mailing address JB Hunt Transport, Inc. 650 JB Hunt Corporate Drive Lowell, AR 72745 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$2,513.71

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Premier Exhibitions Management, LLC Name 3.61 Nonpriority creditor's name and mailing address Kenney Commuications, Inc. 1215 Spruce Avenue Orlando, FL 32824 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,560.00
3.62 Nonpriority creditor's name and mailing address Kirvin Doak Communications 7935 W. Sahara Avenue Las Vegas, NV 89117 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,837.00
3.63 Nonpriority creditor's name and mailing address Las Vegas Magazine & Showbix 2360 Corporate Circle Suite 300 Henderson, NV 89074 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,728.00
3.64 Nonpriority creditor's name and mailing address Manifest, LLC 4110 N. Scottsdale Road Scottsdale, AZ 85251 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,750.00
3.65 Nonpriority creditor's name and mailing address Massey Services, Inc. 3210 Clay Avenue Orlando, FL 32804 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$89.00
3.66 Nonpriority creditor's name and mailing address MDJ & Associates 745 E. Division Lombard, IL 60148 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,439.00
3.67 Nonpriority creditor's name and mailing address Mojave Electric 3755 W. Hacienda Avenue Las Vegas, NV 89118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,300.00

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Premier Exhibitions Management, LLC Name 3.68 Nonpriority creditor's name and mailing address MondoMostre s.r.l. Via del Baullari, 4 Rome, Italy 00186 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$18,074.00
3.69 Nonpriority creditor's name and mailing address Morris Visitor Publications P.O. Box 1584 Augusta, GA 30903 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$45,586.00
3.70 Nonpriority creditor's name and mailing address MS Networks, Inc. (ShoreTel) 4436 Solutions Center Chicago, IL 60677 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Utilities Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$3,126.00
3.71 Nonpriority creditor's name and mailing address Murray Hill Properties, LLC 277 Park Avenue New York, NY 10172 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Lease Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$12,332.07
3.72 Nonpriority creditor's name and mailing address National Design LLC PO Box 51440 Los Angeles, CA 90051 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$310.00
3.73 Nonpriority creditor's name and mailing address Ned Collett 2811 Twisted Willow Court Katy, TX 77450 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Legal Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$6,900.00
3.74 Nonpriority creditor's name and mailing address Nevada Dept. of Taxation PO Box 52685 Suite 180 Phoenix, AZ 85072 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Taxes Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$8,579.34

Debtor Name	Case number (if known)	3:16-bk-02233-PMG
Premier Exhibitions Management, LLC Name 3.75 Nonpriority creditor's name and mailing address New York Dept. of Taxation and Finance PO Box 4127 Binghamton, NY 13902 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Taxes Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$9,502.65
3.76 Nonpriority creditor's name and mailing address New York Dept. of Taxation and Finance Attn: Office of Counsel Bldg. 9, W.A. Harriman Campu Albany, NY 12227 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Taxes Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$400,000.00
3.77 Nonpriority creditor's name and mailing address NYC & Co. 810 Seventh Avenue New York, NY 10019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$5,134.00
3.78 Nonpriority creditor's name and mailing address NYC Dept. of Finance PO Box 3646 New York, NY 10008 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Taxes Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$34,053.72
3.79 Nonpriority creditor's name and mailing address Oasis Reporting Services LLC 400 S. Seventh Street Las Vegas, NV 89138 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$2,365.25
3.80 Nonpriority creditor's name and mailing address Office Depot, Inc. PO Box 633211 Cincinnati, OH 45263 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Vendor Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$484.00
3.81 Nonpriority creditor's name and mailing address Pallet Rack Surplus, Inc. 1981 Old Covington Cross Rd. NE Conyers, GA 30013 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$31,277.00

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3.82	Nonpriority creditor's name and mailing address Parallax Digital Studios Inc 3675 Kennesaw 75 Parkway NW Kennesaw, GA 30144 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,111.33
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3.83	Nonpriority creditor's name and mailing address Penguin Random House 1019 N. State Road 47 Crawfordsville, IN 47933 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,446.43
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3.84	Nonpriority creditor's name and mailing address Pernot and Tatlin 1041 E. Green Street Suite 205 Pasadena, CA 91106 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,255.00
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3.85	Nonpriority creditor's name and mailing address Pitney Bowes Global Financia PO Box 371896 Pittsburgh, PA 15250 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$269.24
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3.86	Nonpriority creditor's name and mailing address Progress Energy dba Duke Energy PO Box 1004 Charlotte, NC 28201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,178.20
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3.87	Nonpriority creditor's name and mailing address Protection One Alarm Monitoring PO Box 29044 Kansas City, MO 64121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$146.40
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3.88	Nonpriority creditor's name and mailing address Queen Courier 38-15 Bell Blvd. Bayside, NY 11361 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
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Debtor Name	Premier Exhibitions Management, LLC	Case number (if known)	3:16-bk-02233-PMG
3.89	Nonpriority creditor's name and mailing address R&L Carriers, Inc. PO Box 10020 Port William, OH 45164 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,901.32
3.90	Nonpriority creditor's name and mailing address Ricoh aka Ikon Financial Service PO Box 532530 Atlanta, GA 30353 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$4,068.39
3.91	Nonpriority creditor's name and mailing address Ricoh USA, Inc. aka Ikon Office Solutions PO Box 532530 Atlanta, GA 30353 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,064.62
3.92	Nonpriority creditor's name and mailing address Rocket Fuel, Inc. 1900 Seaport Blvd. Redwood City, CA 94063 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$5,800.00
3.93	Nonpriority creditor's name and mailing address Rose Brand Wipers, Inc. PO Box 1536 Secaucus, NJ 07094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$559.00
3.94	Nonpriority creditor's name and mailing address Row NYC 700 8th Avenue New York, NY 10036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$18,983.00
3.95	Nonpriority creditor's name and mailing address SBS Group 2866 Momentum Place Chicago, IL 60689 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Professional services</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$48.75

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3.96	Nonpriority creditor's name and mailing address Scana Energy PO Box 100157 Columbia, SC 29202 Date(s) debt was incurred ____ Last 4 digits of account number <u>2986</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$754.84
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3.97	Nonpriority creditor's name and mailing address Screen Actors Guild 1900 Broadway 5th Floor New York, NY 10023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$163,000.00
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3.98	Nonpriority creditor's name and mailing address Shockwave Cargo 2001 W. Main Street Suite 222 Stamford, CT 06902 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$9,600.00
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3.99	Nonpriority creditor's name and mailing address Soprintendenza Archeologica di Napoli e Pompei Piazza Museo 19 Naples, Italy 80135 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$442,018.00
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3.100	Nonpriority creditor's name and mailing address South Coast Transportation & Distribution 1424 S. Raymond Avenue Fullerton, CA 92831 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$20,565.00
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3.101	Nonpriority creditor's name and mailing address Space Coast Fire and Safety 420 Manor Drive Merritt Island, FL 32952 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$102.24
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3.102	Nonpriority creditor's name and mailing address Speciality Distribution dba Beyda and Associates PO Box 772288 Orlando, FL 32877 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Merchandise inventory</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,226.00
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3.103	Nonpriority creditor's name and mailing address Team Alternatives 901 W. Alameda Avenue Suite 100 Burbank, CA 91506 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,187.80
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3.104	Nonpriority creditor's name and mailing address Team Worldwide PO Box 668 Winnsboro, TX 75494 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,415.23
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3.105	Nonpriority creditor's name and mailing address TelePacific Communications PO Box 509013 San Diego, CA 92150 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31.00
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3.106	Nonpriority creditor's name and mailing address The Highland Mint Co. Attn: Vince Bohbot 4100 N Riverside Drive Melbourne, FL 32937 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$840.00
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3.107	Nonpriority creditor's name and mailing address The Place Media 1400 Quail Street Newport Beach, CA 92660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,500.00
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3.108	Nonpriority creditor's name and mailing address The Savvy Pass 101 West 23rd Street Suite 400 New York, NY 10011 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00
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3.109	Nonpriority creditor's name and mailing address The Superlative Group 921 Huron Road Cleveland, OH 44115 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
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3.110	Nonpriority creditor's name and mailing address Tickets for Groups 541 Mountain Road Wilbraham, MA 01095 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,872.00
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3.111	Nonpriority creditor's name and mailing address Time Out New York 475 Tenth Avenue 12th Floor New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$23,156.00
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3.112	Nonpriority creditor's name and mailing address Total Quality Logistics, LLC PO Box 634558 Cincinnati, OH 45623 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$5,425.00
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3.113	Nonpriority creditor's name and mailing address Trip Advisor LLC 141 Needham Street Newton, MA 02464 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$11,485.00
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3.114	Nonpriority creditor's name and mailing address TSX Operating Co., LLC 70 West 40th Street 9th Floor New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$23,047.00
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3.115	Nonpriority creditor's name and mailing address Tyler's Display Supply 1731 Taylor Street Atlanta, GA 30318 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$504.96
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3.116	Nonpriority creditor's name and mailing address Uline PO Box 88741 Chicago, IL 60680 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$4,106.00
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3.117	Nonpriority creditor's name and mailing address United Rentals PO Box 100711 Atlanta, GA 30384 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,340.00
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3.118	Nonpriority creditor's name and mailing address United Van Lines, LLC 22304 Network Place Chicago, IL 60673 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,793.00
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3.119	Nonpriority creditor's name and mailing address Universal Creative Concepts 10143 Royalton Road North Royalton, OH 44133 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,813.00
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3.120	Nonpriority creditor's name and mailing address UPS PO Box 7247-0244 Philadelphia, PA 19170 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$157.65
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3.121	Nonpriority creditor's name and mailing address UPS Supply Chain Solutions 28013 Network Place Chicago, IL 60673 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$819.40
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3.122	Nonpriority creditor's name and mailing address Verifone, Inc. 4523 Solutions Lockbox #774523 Chicago, IL 60677 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,912.00
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3.123	Nonpriority creditor's name and mailing address Village Voice PO Box 5645 New York, NY 10087 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000.00
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3.124	Nonpriority creditor's name and mailing address VS Media Group 7648 Southland Blvd. Orlando, FL 32809 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,720.00
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3.125	Nonpriority creditor's name and mailing address Waste Management of Atlanta P.O. Box 105453 Atlanta, GA 30348 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$753.04
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3.126	Nonpriority creditor's name and mailing address Wells Fargo Equipment Financ P.O. Box 7777 San Francisco, CA 94120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$361.10
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3.127	Nonpriority creditor's name and mailing address Wessels & Associates LLC PO Box 233 Clawson, MI 48017 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.44
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3.128	Nonpriority creditor's name and mailing address WNBC - NBC Universal Media PO Box 281263 Atlanta, GA 30384 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,398.00
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3.129	Nonpriority creditor's name and mailing address Yelp, Inc. 140 New Montgomery 9th Floor San Francisco, CA 94105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,314.00
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3.130	Nonpriority creditor's name and mailing address Zephyrhills/Ready Refresh PO Box 856680 Louisville, KY 40285 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$134.00
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Debtor **Premier Exhibitions Management, LLC**
NameCase number (if known) **3:16-bk-02233-PMG****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 3,448,944.34
5c.	\$ 3,448,944.34

Fill in this information to identify the case:Debtor name **Premier Exhibitions Management, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**Case number (if known) **3:16-bk-02233-PMG**☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal**Property*

(Official Form 206A/B).

2. List all contracts and unexpired leases**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Non-recourse promissory note related to the acquisition of AEI 04/20/2017**AEG Live LLC
425 West 11th Street
Los Angeles, CA 90015**

2.2. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Non-recourse promissory note related to the acquisition of AEI 04/20/2017**AEG Live LLC
5750 Wilshire Blvd.
Suite 501
Los Angeles, CA 90036**

2.3. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

NY Location: (1) Syzygy server and (2) LEB Electric - camera sytem, security door, and network 04/06/2021**Ascentium Capital LLC
23970 Highway 59
Kingwood, TX 77339**

2.4. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

NY Location: LEB Electric - camera sytem, security door, and network 05/31/2021**Ascentium Capital LLC
23970 Highway 59
Kingwood, TX 77339**

Debtor 1 **Premier Exhibitions Management, LLC**
 First Name Middle Name Last Name

Case number (if known) **3:16-bk-02233-PMG**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	NY Location: LEB Electric - camera sytem, security door, and network 06/11/2021	Ascentium Capital LLC 23970 Highway 59 Kingwood, TX 77339
2.6.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Bodies Revealed 3 touring exhibition 01/01/2017	Bossard Library 7 Spruce Street Gallipolis, OH 45631
2.7.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Exhibition rights to "Saturday Night Live" 02/15/2020	Broadway Video Entertainment 30 Rockefeller Plaza 54th Floor New York, NY 10112
2.8.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Cleveland merchandise warehouse - Address TBD 08/14/2017	CRI Properties, Ltd. PO Box 734 Aurora, OH 44202
2.9.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Titanic exhibition hall - 7324-A International Drive, Orlando, FL 32819 09/30/2016	George F. Eyde Orlando, LLC Louis J. Eyde Orlando, LLC PO Box 4218 East Lansing, MI 48826
2.10.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Exhibition rights to the story of the Whydah pirate ship	Historic Shipwreck, Inc. & Barry L. Clifford 16 Macmillan Wharf, Box 493 Provincetown, MA 02657

Debtor 1 **Premier Exhibitions Management, LLC**
 First Name Middle Name Last Name

Case number (if known) **3:16-bk-02233-PMG**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.11. State what the contract or lease is for and the nature of the debtor's interest

**Atlanta corporate office
- 3045 Kingston Court,
Suite I, Peachtree
Corners, GA 30077
Ste I: 01/21/19**

State the term remaining

List the contract number of any government contract

**HM Peachtree Corners
PO BOX 32149
New York, NY 10087**

2.12. State what the contract or lease is for and the nature of the debtor's interest

**Atlanta corporate office
- 3045 Kingston Court,
Suite I, Peachtree
Corners, GA 30077
Ste G: 12/31/16**

State the term remaining

List the contract number of any government contract

**HM Peachtree Corners
PO BOX 32149
New York, NY 10087**

2.13. State what the contract or lease is for and the nature of the debtor's interest

**Atlanta Corporate
Office - servers &
desktops**

State the term remaining

List the contract number of any government contract

10/17/2015

**Lenovo Financial Services
PO Box 550599
Jacksonville, FL 32255**

2.14. State what the contract or lease is for and the nature of the debtor's interest

**Bodies Revealed 4
touring exhibition**

State the term remaining

List the contract number of any government contract

01/16/2017

**Liberty Science Center
222 Jersey City Blvd.
Jersey City, NJ 07305**

2.15. State what the contract or lease is for and the nature of the debtor's interest

**Titanic Touring unit 7
exhibition**

State the term remaining

List the contract number of any government contract

01/06/2019

**Mayborn Museum of Baylor
University
1300 S. University Parks Dr.
Waco, TX 76706**

2.16. State what the contract or lease is for and the nature of the debtor's interest

**The Discovery of King
Tut exhibition**

**Oregon Museum of Science and
Industry
1945 SE Water Avenue
Portland, OR 97214**

Debtor 1 **Premier Exhibitions Management, LLC**
 First Name Middle Name Last Name

Case number (if known) **3:16-bk-02233-PMG**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining **01/27/2019**

List the contract number of any government contract _____

2.17. State what the contract or lease is for and the nature of the debtor's interest **Titanic Touring unit 6 exhibition**

State the term remaining **03/12/2017**

List the contract number of any government contract _____

**Peroria Riverfront Museum
1125 W. Lake Avenue
Peoria, IL 61614**

2.18. State what the contract or lease is for and the nature of the debtor's interest **Titanic Touring unit 6 exhibition**

State the term remaining **10/23/2016**

List the contract number of any government contract _____

**Portland Science Center
68 Commercial Street
Portland, ME 04101**

2.19. State what the contract or lease is for and the nature of the debtor's interest **Titanic Touring unit 2 exhibition**

State the term remaining **07/10/2016**

List the contract number of any government contract _____

**PVA Expo / JVS Group
Prague Gate House, Türkova 5
149 00 Praha 4 Chodov
Prague 4, Czech Republic**

2.20. State what the contract or lease is for and the nature of the debtor's interest **3 exhibitions halls: Bodies, Titanic and one empty - Luxor Hotel, 3900 Las Vegas Blvd. South, Las Vegas, NV 89119**

State the term remaining **07/31/2018**

List the contract number of any government contract _____

**Ramparts, Inc.
dba Luxor Hotel & Casino
3900 Las Vegas Blvd. South
Las Vegas, NV 89119**

2.21. State what the contract or lease is for and the nature of the debtor's interest **Copier Equipment Rental - Corporate Office**

State the term remaining **N/A**

List the contract number of any government contract _____

**Ricoh
aka Ikon Financial Service
P.O. BOX 532530
Atlanta, GA 30353**

Debtor 1 **Premier Exhibitions Management, LLC**
 First Name Middle Name Last Name

Case number (if known) **3:16-bk-02233-PMG**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.22. State what the contract or lease is for and the nature of the debtor's interest **Copier Equipment Rental - Permanent Venues and Lab**

State the term remaining **08/01/2016**

List the contract number of any government contract

**Ricoh
aka Ikon Financial Service
P.O. BOX 532530
Atlanta, GA 30353**

2.23. State what the contract or lease is for and the nature of the debtor's interest **Copier Equipment Rental - New York**

State the term remaining **05/01/2018**

List the contract number of any government contract

**Ricoh
aka Ikon Financial Service
Atlanta, GA 30353**

2.24. State what the contract or lease is for and the nature of the debtor's interest **Titanic artificat lab & warehouse facilities**

State the term remaining **05/31/2017**

List the contract number of any government contract

**Selig Enterprises, Inc.
1100 Spring Street
Suite 55
Atlanta, GA 30309**

2.25. State what the contract or lease is for and the nature of the debtor's interest **Exhibition rights to "The Discovery of King Tut"**

State the term remaining **04/07/2018**

List the contract number of any government contract

**Semmel Concerts GmbH
Am Muhlgraben 70
95445 Bayreuth**

2.26. State what the contract or lease is for and the nature of the debtor's interest **Titanic Touring unit 7 exhibition**

State the term remaining **03/12/2017**

List the contract number of any government contract

**Sloan Museum
1221 E. Kersley Street
Flint, MI 48503**

2.27. State what the contract or lease is for and the nature of the debtor's interest **Bodies Revealed exhibition hall - Building 2 South, Town Center at Altantic Station, Atlanta, GA**

State the term remaining **01/31/2017**

**SP5 Atlantic Retail Ventures, LLC
1380 Atlantic Drive
Suite 142
Atlanta, GA 30363**

Debtor 1 **Premier Exhibitions Management, LLC**
 First Name Middle Name Last Name

Case number (if known) **3:16-bk-02233-PMG**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract _____

2.28. State what the contract or lease is for and the nature of the debtor's interest **The Discovery of King Tut exhibition**

State the term remaining **01/17/2018**

List the contract number of any government contract _____

**St. Louis Science Center
5050 Oakland Avenue
Saint Louis, MO 63110**

2.29. State what the contract or lease is for and the nature of the debtor's interest **Titanic Touring unit 5 exhibition**

State the term remaining **07/03/2016**

List the contract number of any government contract _____

**Tabakfabrik Linz / COFO
Dr.-Emil-Brichta-Str. 9
Passau, Germany, MBC D-94036**

2.30. State what the contract or lease is for and the nature of the debtor's interest **The Discovery of King Tut exhibition**

State the term remaining **09/05/2016**

List the contract number of any government contract _____

**The Putnam Museum
1717 W. 12th Street
Davenport, IA 52804**

2.31. State what the contract or lease is for and the nature of the debtor's interest **Titanic Touring unit 7 exhibition**

State the term remaining **11/06/2016**

List the contract number of any government contract _____

**Western Heritage Museum
1 Thunderbird Circle
NMJC Campus
Hobbs, NM 88240**

Fill in this information to identify the case:Debtor name **Premier Exhibitions Management, LLC**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**Case number (if known) **3:16-bk-02233-PMG**☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1 **Premier Exhibitions, Inc.** 3045 Kingston Court Suite I Peachtree Corners, GA 30071

Haiping Zou

☐ D _____
☐ E/F _____
☐ G _____

2.2 **Premier Exhibitions, Inc.** 3045 Kingston Court Suite I Peachtree Corners, GA 30071

Jihe Zhang

☐ D _____
☐ E/F _____
☐ G _____

2.3 **Premier Exhibitions, Inc.** 3045 Kingston Court Suite I Peachtree Corners, GA 30071

Lange Feng

☐ D _____
☐ E/F _____
☐ G _____

2.4 **Premier Merchandising, LLC** 3045 Kingston Court Suite I Peachtree Corners, GA 30071

Haiping Zou

☐ D _____
☐ E/F _____
☐ G _____

Debtor Premier Exhibitions Management, LLCCase number (if known) 3:16-bk-02233-PMG**Additional Page to List More Codebtors****Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.***Column 1: Codebtor**Column 2: Creditor*

2.5	Premier Merchandising, LLC	3045 Kingston Court Suite I Peachtree Corners, GA 30071	Jihe Zhang	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.6	Premier Merchandising, LLC	3045 Kingston Court Suite I Norcross, GA 30071	Lange Feng	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	RMS Titanic, Inc.	3045 Kingston Court Suite I Peachtree Corners, GA 30071	Haiping Zou	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.8	RMS Titanic, Inc.	3045 Kingston Court Suite I Peachtree Corners, GA 30071	Jihe Zhang	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.9	RMS Titanic, Inc.	3045 Kingston Court Suite I Peachtree Corners, GA 30071	Lange Feng	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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